## **APPLICATION FOR CONTRACTOR LICENSE TRANSFER**



From a business to an individual name or elective suspension

License Holder Name:				
<b>Current Address:</b>				
<b>Current Phone Number:</b>				
Email Address:				
Type of License:				
Licencse Number:				
Former Company Name:				
I,a permit and perform the license and the authority v	, holder of the ab work associated with it be rem ested herein be transferred as	bove license, do hearby rec noved from the assigned c s follows:	quest this license and the authority to apply for ompany above. I further request that the	
		y own name. I am attach	ing the necessary fee, bond, liability insurance ing the change.	
	Place my license in electi	ve suspension (escrow).		
the next ninety (90) days, permitted projects and/or	my license must remain in m find another licensed contract	y individual name to prov tor to assume responsibili	obtain permits and perform work; and that for ide time for the former assignee to complete ty for work in progress. I further understand e paid by the due date of the license renewal.	
Signature		Date	2	
Sworn to before me and sign	ned in my presence this	day of	, in the year	
Notary Public Signature		My Commission	My Commission Expires on	

Notary Seal Here